

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/533662

FILING DATE

03 MAY 2005

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			/			
2						
3						
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42			/			
43			/			
44			/			
45			/			
46			/			
47			/			
48			/			
49			/			
50			/			
TOTAL IND.			/			
TOTAL DEP.			10			
TOTAL CLAIMS			11			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						/
53						/
54						/
55						/
56						/
57						/
58						/
59						/
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92						/
93						/
94						/
95						/
96						/
97						/
98						/
99						/
100						/
TOTAL IND.					0	
TOTAL DEP.			29			
TOTAL CLAIMS			39			